

MEETING MINUTES

Project Name: IPRS	Doc. Version No: 1.0	Status: Draft
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Meeting Name: IPRS Core Team Meeting
Facilitator: Eric Johnson, DMH
Scribe: Jackie Kidder
Date: 10/19/05
Time: 10:00am - 11:00 a.m.
Location: Hargrove, Conference Room D

IPRS Core Team Attendees:

<ul style="list-style-type: none"> x Sharlene Bryant x Cathy Bennett x Cheryl McQueen x Shannon Johnson Gary Imes x Joyce Sims x Jackie Kidder Rick Debell x Thelma Hayter x Eric Johnson 	Others: <ul style="list-style-type: none"> Tim Sullivan x Jamie Herubin x Sandy Flores Sara Parks x Mike Frost x Linda Smith x Carlisa Stallings x Paul Carr
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Attendees:

<ul style="list-style-type: none"> x Alamance-Caswell x Albemarle x Catawba x Centerpoint Crossroads x Cumberland x Durham x Eastpointe x Edgecombe-Nash x Five – County MHA x Foothills x Guilford x Johnston x Mecklenburg x Neuse x New River 	<ul style="list-style-type: none"> x Onslow x OPC x Pathways x Pitt x Roanoke-Chowan x Rockingham x Sand hills Center x SE Center x SE Regional x Smoky Mountain x Tideland x Wake x Western Highlands x Wilson-Greene
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Attendees:

Item No. Topics

1. **Division and EDS Review**

Review checkwrite – October 14th

Upcoming checkwrites: October 21st, November 4th

Update on Medicaid Issues

BugCentral Status

Key CSRs

Operations Support: File Maintenance, Security, and Help Desk
2. **Area Programs**

Area Programs, Division and EDS

Roll call

Please mute phones or refrain from excess activity to help with communications. Please state your name and which Area Program you are from when you speak.

Review Check-Write October 14

Upcoming Check-write (cut-off dates) – October 21, November 4, 11

Agenda items

Review Medicare TPL

Review Service Definition Limitations

October 21 is the final check-write-cutoff to submit claims with DOS 7-1-04 to 6-30-05.

Reminder: Usage of **T1017-HI** will follow Medicaid: X-Walk to YP962, effective **DOS 9-1-05**, covered by ADSN, CDSN, and ADMRI. Alert will be published soon.

Reminder: After receiving new provider numbers from DMA, please send these numbers to the IPRS QA distribution list:
IPRS.Qanda@ncmail.net

IPRS Questions or Concerns

DMA Direct Provider Enrollment Questions – A. Floyd/ P. Horrell

MMIS Updates – Tim Sullivan & Shannon Johnson

Medicaid Questions or Concerns

DMH and/or EDS concluding remarks

Roll Call Updates

Next Meeting: October 26, 2005

For assistance with IPRS claims, adjustments, R2Web, accessing application, etc., call the IPRS Help Desk – 1-800-688-6696, ext 53355, M-F, 8:00 a.m. - 4:30 p.m., excluding holidays.

DMH IPRS Question and Answer email address -
iprs.qanda@ncmail.net

ADMINISTRATION NOTES (10:00 a.m. DIVISION AND EDS REVIEW)

Item No.	Topics
1.	<p>Review Checkwrite from October 14th Eric Cooper (EDS) provided an update on the negative balances/adjustments for CSR 777. Approximately 40 claims have not been processed as replacements. These claims are scheduled to be processed in the 10/21/04 checkwrite cycle. Other negative balances remain as a result of outstanding AR financial transactions. These balances will return to \$0.00 as Area Programs submit and receive payment for new day claims.</p> <p>A number of Area Programs had large number of denials for duplicates and client eligibility issues. Provider Services has initiated communications with those APs.</p> <p>18% of the claims processed in this checkwrite correctly denied and were related to the new billing requirements implemented with the DPE project. At the request of DMH, EDS participated in a meeting scheduled with Infomc and Pitt and Durham to review billing requirements.</p>
2.	<p>Upcoming checkwrites: October 21st, November 4th, 11th</p>
3.	<p>Update on Medicaid Issues – Shannon answered questions from Jody (Johnston) regarding physicians assistants and Martha (New River) regarding CAP denials.</p> <p>Mike (for Tim) provided an update/clarification to the TPL/Medicare bypass for enhanced benefits. Mike explained that during last week's Core Team, Tim was trying to convey that from the system's perspective, the Medicare bypass is separate from the TPL bypass. So for claims that bypass TPL but are denying for a Medicare edit, the APs need to bill Medicare first or DMA would need to specifically instruct EDS to bypass Medicare for that procedure code.</p> <p>Shannon stated there are four codes that are subject to TPL and Medicare. They are: ACTT (H0040), Mobile Crisis (H2011), Diagnostic Assessment (T1023) and Partial Hospital (H0035).</p>
4.	<p>Bug Central Status: One bug in customer review. One bug in process – 57 claims were resubmitted in the 10/14/05 checkwrite cycle. A few of these denied for correct reasons. The bug will now be placed in customer review.</p>
5.	<p>Key CSRs: The bi-weekly CSR meeting will take place after Core Team.</p>
6.	<p>Operations Support – File Maintenance, Security – YP962 is being added to the select benefit packages for T1017/HI. IPRS will implement with Medicaid.</p>

ADMINISTRATION NOTES (10:30 a.m. AREA PROGRAMS CONFERENCE CALL)	
Item No.	Topics
1.	Roll Call
2.	Please mute phones or refrain from excess activity to help with communications. Please state your name and which Area Program you are from when you speak.
3.	<p>Review Checkwrite – October 14th Q: Pam (Western Highlands) - DPE question – does H0004 and H0031 pay in Medicaid?</p>

	<p>A: Thelma – Yes, for non-licensed employees/contractors.</p> <p>Q: Follow-up – for six months after the new service definitions have been approved?</p> <p>A: Thelma – Yes, but the NC Council has raised concern about it being for only six months. This is under advisement at the Division.</p>
4.	Upcoming checkwrite (cut-off dates) October 21 st , November 4 th , 11 th
5.	<p>Review Medicare TPL – Mike</p> <p>Mike clarified Tim Sullivan’s statements from last week’s Core Team. Mike explained that the important point that Tim was trying to convey is that from the system’s perspective, the TPL bypass is separate from the Medicare bypass. Therefore, if a code is set up to bypass TPL editing in the system, it doesn’t always mean that the system is set up to bypass Medicare editing too. DMA’s instructions to EDS specifically delineate to either 1) bypass TPL, 2) bypass Medicare or 3) bypass both TPL and Medicare.</p> <p>During the recent workshops, Shannon Johnson communicated that there were four procedure codes that go through the TPL and Medicare editing.</p> <p>Q: Kathy (Smoky) – What are the codes?</p> <p>A: Shannon - Four codes that ARE subject to TPL and Medicare. ACTT (H0040), Mobile Crisis (H2011), Diagnostic Assessment (T1023) and Partial Hospital (H0035).</p> <p>Q: Kay (Eastpointe) – Is Case Management included?</p> <p>A: Shannon – No</p> <p>Q: Kay (Eastpointe) – Are T1017/HE and HI not billable to Medicare.</p> <p>A: Shannon - Carol Robertson said they were not.</p> <p>Review Service Definition Limitations</p> <p>Thelma - The limitations were sent to the IPRS coordinators last week for review and comment. Please send suggestions and concerns to IPRS Q and A for consideration. There has been some confusion with defining “periodic”. Example would be H0001 that pays 11 (15 min. units) and denies the 12th. Periodic is one client, one service, one provider, one day.</p> <p>Q: Carol (Pitt) – Can clarification be sent out in writing?</p> <p>A: Thelma – She will update the listing on limitations and re-send.</p> <p>Q: Lynn (Foothills) – What are the timeframes? Per day, six months, year?</p> <p>A: Thelma – Will include in the re-send.</p> <p>C: Janet (Johnston) – She did not receive the attachment for the limitations.</p> <p>R: Thelma – will get them to her.</p> <p>Q: Dean (Roanoke-Chowan) – Could the limitations be placed back on the service definition manual?</p> <p>A: Thelma – Believed they are on the latest version located on the web.</p> <p>Q: Follow-up – The last copy on the web was revised in 2003. YP020 is not in the doco.</p> <p>A: Thelma – Will research this and get back to Dean.</p> <p>C: Eric – Reminder that October 21 is the timely filing cut-off for claims with DOS 7/1/05 thru</p>

	<p>6/30/05</p> <p>T1017/HI</p> <p>Medicaid may delay implementation past 10/21/05. An IPRS user alert will be sent once this is placed in production.</p> <p>Q: Kim (Neuse) – Will the matrix be updated with this code.</p> <p>A: Thelma – Yes, the updated matrix was emailed in the last week or two.</p> <p>IPRS Questions or Concerns</p> <p>Q: Jeanna (Catawba) – Is there anything in writing for room and board if in the DSS custody vs. home?</p> <p>A: Thelma – The executive leadership team is currently working on this topic. Once complete, it will be sent out.</p> <p>DMA Direct Provider Enrollment Questions – Angela Floyd and Pamela Horrell (absent)</p> <p>Medicaid Questions or Concerns</p> <p>Q: Tina (Sandhills) – Has CAP supplies denial questions.</p> <p>A: Shannon asked that examples be sent to her for review.</p> <p>Q: Pam (Western Highlands) - Asked about Medicaid denials for CAP clients submitted with the T1017/HE and if those are still being paid.</p> <p>A: Thelma - Suggested that some claim examples be sent to IPRS Q and A to be forwarded to Shannon Johnson to research.</p> <p>DMH and/or EDS Concluding Remarks:</p> <p>6. Updates to Roll Call; Other Questions?</p> <p>7. Q: Kim (Neuse) – They are receiving a paper check for Medicaid monies for their multi-specialty and physician group billing providers. She understands that an EFT agreement is needed. Where can that be found?</p> <p>A: Shannon – The EFT agreement is located on DMA’s website.</p>
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Action Items

Item No.	Open Date	Description	Assigned To	Comments	Status	Target Date
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Issue Items

Item No.	Open Date	Description	Assigned To	Comments	Status	Target Date
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